

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
101	11					
2	0					
3	1					
104	1					
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TOTAL IND.	2					
TOTAL DEP.	26	↔	↔	↔	↔	↔
TOTAL CLAIMS	28	████████	████████	████████	████████	████████

	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
TOTAL DEP.		↔	↔	↔	↔	↔
TOTAL CLAIMS		████████	████████	████████	████████	████████

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FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED

AFTER 1ST
AMENDMENT

AFTER 2ND
AMENDMENT

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TOTAL IND.

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CLAIMS

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TOTAL IND.

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